# State of Rhode Island and Providence Plantations Department of Administration Division of Purchases

### RIVIP BIDDER CERTIFICATION COVER FORM

### **SECTION 1 - BIDDER INFORMATION**

Bidder must be registered as a vendor on the RIVIP system at www.purchasing.ri.gov to submit a bid proposal.

Solicitation Number:

7549831A2

Solicitation Title:

NEW WASTEWATER LIFT STATION (12 PGS)

**Bid Proposal Submission** 

Deadline Date & Time:

9/30/2015

10:00 AM

RIVIP Vendor ID #:

6124

**Bidder Name:** 

East Coast Landscaping & Construction, Inc.

Address:

202 Chase Road

Portsmouth, RI 02871

USA

Telephone:

(401) 683-5656

Fax:

(401) 683-5662

Contact Name:

Billy Reed

Contact Title:

Chief Estimator

Contact Email:

billyreed@eastcoastconstruction.com

### **SECTION 2 — DISCLOSURES**

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No) for Disclosures 1-4, and if "Yes," provide details below. Complete Disclosure 5. If the Bidder is publicly held, the Bidder may provide owner information about only those stockholders, members, partners, or other owners that hold at least 10% of the record or beneficial equity interests of the Bidder.

1. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been subject to suspension or debarment by any federal, state, or municipal governmental authority, or the subject of criminal prosecution, or convicted of a criminal offense within the previous 5 years. If "Yes," provide details below.

State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has had any contracts with a federal, state, or municipal governmental authority terminated for any reason within the previous 5 years. If "Yes," provide details below.

3. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been fined more than \$5000 for violation(s) of any Rhode Island environmental law(s) by the Rhode Island Department of Environmental Management within the previous 5.years. If "Yes," provide details below.

N		State whether any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder is serving or has served within the past two calendar years as either an appointed or elected official of any state governmental authority or quasipublic corporation, including without limitation, any entity created as a legislative body or public or state agency by the general assembly or constitution of this state.  List each officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder, and each intermediate parent company and the ultimate parent company of the Bidder. For each individual, provide his or her name, business address, principal occupation, position with the Bidder, and the percentage of ownership, if any, he or she holds in the Bidder, and each intermediate parent company and the ultimate parent company of the Bidder.
<b>₩</b>	ILT AX 1	Adetails (continue on additional sheet if necessary):  POULTON, PRESIDENT - 2011.  EAST COAST LANDERPING & CONSTRUCTION, TNC.  ESTERY, VICE PRESIDENT - 401.  DETERMINED, SECRETARY - 401.  TOUTH RED, SECRETARY - 401.
1	Bido	SECTION 3 —CERTIFICATIONS  ders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.
Indica	ate "Y	Y" (Yes) or "N" (No), and if "No," provide details below.
THE		DER CERTIFIES THAT:  The Bidder will immediately disclose, in writing, to the State Purchasing Agent any potential conflict of interest which may occur during the term of any contract awarded pursuant to this solicitation.
7	. 2.	The Bidder possesses all licenses and anyone who will perform any work will possess all licenses required by applicable federal, state, and local law necessary to perform the requirements of any contract awarded pursuant to this solicitation and will maintain all required licenses during the term of any contract awarded pursuant to this solicitation. In the event that any required license shall lapse or be restricted or suspended, the Bidder shall immediately notify the State Purchasing Agent in writing.
了	3.	The Bidder will maintain all required insurance during the term of any contract pursuant to this solicitation. In the event that any required insurance shall lapse or be canceled, the Bidder will immediately notify the State Purchasing Agent in writing.
7	4.	The Bidder understands that falsification of any information in this bid proposal or failure to notify the State Purchasing Agent of any changes in any disclosures or certifications in this Bidder Certification may be grounds for suspension, debarment, and/or prosecution for fraud.
7	5.	The Bidder has not paid and will not pay any bonus, commission, fee, gratuity, or other remuneration to any employee or official of the State of Rhode Island or any subdivision of the State of Rhode Island or other governmental authority for the purpose of obtaining an award of a contract pursuant to this solicitation. The Bidder further certifies that no bonus, commission, fee, gratuity, or other remuneration has been or will be received from any third party or paid to any third party contingent on the award of a contract pursuant to this solicitation.
7	6.	This bid proposal is not a collusive bid proposal. Neither the Bidder, nor any of its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents has in any way colluded, conspired, or agreed, directly or indirectly, with any other bidder or person to submit a collusive bid proposal in response to the solicitation or to refrain from submitting a bid proposal in response to the solicitation, or has in any manner, directly or indirectly, sought by agreement or collusion or other communication with any other bidder or person to fix the price or prices in the bid proposal or the bid proposal of any other bidder, or to fix any overhead, profit, or cost component of the bid proposal or the bid proposal of any other bidder, or to secure through any collusion, conspiracy, or unlawful agreement any advantage against the State of Rhode Island or any person with an interest in the contract awarded pursuant to this solicitation. The bid price in the bid proposal is fair and proper and is not tainted by any collusion, conspiracy, or unlawful agreement on the part of the Bidder, its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents.

2013-4 Page 2 of 3 2/20/2015

8. The Bidder will comply with all of the laws that are incorporated into and/or applicable to any contract with the State of Rhode Island.

7. The Bidder: (i) is not identified on the General Treasurer's list created pursuant to R.I. Gen. Laws § 37-2.5-3 as a person or entity engaging in investment activities in Iran described in § 37-2.5-2(b); and (ii) is not engaging in any such investment activities in Iran.

Certification details (continue on additional sheet if necessary	y):
State of Rhode Island through the Division of colicitation and the bid proposal. The Bidder of agrees to comply with its terms and conditions information submitted in the bid proposal (incomplete. The Bidder acknowledges that the term is incorporated into any contract awarded to the person signing below represents, under penals	suant to this solicitation constitutes an offer to contract with the of Purchases on the terms and conditions contained in this certifies that: (1) the Bidder has reviewed this solicitation and c; (2) the bid proposal is based on this solicitation; and (3) the cluding this Bidder Certification Cover Form) is accurate and rms and conditions of this solicitation and the bid proposal will be Bidder pursuant to this solicitation and the bid proposal. The ty of perjury, that he or she is fully informed regarding the and has been duly authorized to execute and submit this bid
	BIDDER
Date: SEPTETIBER 30, 2015	EAST COAST ANDSCEPTING ? CONSTRUCTION, INC.
	Signature in ink  NELLAT KEED, SECKETRRY  Printed name and title of person signing on behalf of Bidder

Solicitation Title: New Wastewater Lift Station

В	ּ סו	FO	RM	ı
_		_		ı

To:

The Department of Administration, Division of Purchases

One Capitol Hill, Providence, RI 02908

Project:

New Wastewater Lift Station

Community College of Rhode Island

Flanagan Campus

Bidder:

info@eastcoastcoastruction.com
Contact email

### **BASE BID PRICE** 1.

The Bidder submits this bid proposal to perform all of the work (including labor and materials) as described in the solicitation for this Base Bid Price, (including the costs for all Allowances, Bonds, and Addenda):

\$ 646,620.00

(Base Bid Price in figures printed electronically, typed, or handwritten legibly in ink)

SIX HUNDRED AND FORTY SIX THOUSAND SIX HUNDRED AND TWENTY )

(Base Bid Price in words electronically, typed, or handwritten legibly in ink)

Solicitation Title: New Wastewater Lift Station

### ALLOWANCES

The Base Bid Price *includes* the costs for the following Allowances:

- 1) Allowance #1: Concealed and subsurface conditions (Note: Only applies to unsuitable & unexpected materials):
  - a. \$10,000.00 (ten thousand dollars)
- 2) Removal of Ledge and or Rock: Include allowance for the removal of ledge and or rock greater than 1 cubic yard.
  - a. \$2,000.00 (two thousand dollars)

Total Allowances: \$12,000.00 (twelve thousand dollars)

### BONDS

The Base Bid Price <u>includes</u> the costs for all Bid and Payment and Performance Bonds required by the solicitation.

### ADDENDA

The Bidder has examined the entire solicitation (including the following Addenda), and the Base Bid Price *includes* the costs of any modifications required by the Addenda.

All Addenda must be acknowledged.

Addendum No	1_, dated	19	14	15	
Addendum No	<u>2,</u> dated	19	22	15	
Addendum No	, dated	d		•	
Addendum No	, dated	d t			
Addendum No	, dated	j			

### 2. ALTERNATES (Additions to Base Bid Price)

The Bidder offers to: (i) perform the work described in these Alternates as selected by the State in the order of priority specified below, based on the availability of funds and the best interest of the State; and (ii) increase the Base Bid Price by the amount set forth below for each Alternate selected.

N/A

Solicitation Title: New Wastewater Lift Station

### 3. UNIT PRICES

The Bidder submits these predetermined Unit Prices as the Basis for any change orders approved in advance by the State. These Unit Prices include <u>all</u> costs, including labor, materials, services, regulatory compliance, overhead, and profit.

N/A

### 4. CONTRACT TIME

The Bidder offers to perform the work in accordance with the timeline specified below:

•	Start Submittals	November 2015
•	Complete Submittals	December 2015
•	Start of Onsite Construction	April 4, 2016
•	Substantial Completion	August 1, 2016
•	Final Completion	August 8, 2016

### 5. LIQUIDATED DAMAGES

The successful bidder awarded a contract pursuant to this solicitation shall be liable for and pay the State, as liquidated damages and not as a penalty, the following amount for <u>each</u> calendar day of delay beyond the date for substantial completion, as determined in the sole discretion of the State:

Five Hundred Dollars (\$500.00) per day.

### **BID FORM SIGNATURE(S)**

This bid proposal is irrevocable for 60 days from the bid proposal submission deadline.

If the Bidder is determined to be the successful bidder pursuant to this solicitation, the bidder will promptly: (i) comply with each of the requirements of the Tentative Letter of Award; and (ii) commence and diligently pursue the work upon issuance and receipt of the purchase order from the State and authorization from the user agency.

The person signing below certifies that he or she has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.

**Solicitation Title: New Wastewater Lift Station** 

Date: SEPTETTBER 30, 2015

**B!DDER** 

EAST COAST LANDSCAPENG ?

Name of Bidder

Signature in ink

Printed name and title of person signing on behalf of Bidder

# 85333

Bidder's Contractor Registration Number

Selective Insurance Company of America 40 Wantage Avenue Branchville, New Jersey 07890 973-948-3000

B 1164625

### **BID BOND**

### KNOW ALL MEN BY THESE PRESENTS:

That East Coast Landscaping and Construction Inc.

202 Chase Road Portsmouth, RI 02871 as Principal, and the SELECTIVE INSURANCE CO existing under the laws of the State of New Jersey, (hereinafter called the Surety), as Surety,	(hereinafter called the Principal) DMPANY OF AMERICA, a corporation created and with its principal office in Branchville, New Jersey
are held and firmly bound unto State of Rhode Island Department of Transportation, One Capital Hill Provid	ence, RI (hereinafter called the Obligee)
in the full and just sum of 5 % Percent of the T (5%), good and lawful money of the Unite money well and truly to be made, the said Principal an executors, administrators, successors and assigns, jointly	d States of America, to the payments of which sum of d Surety bind themselves, their and each of their heirs,
Signed, sealed and dated this 28th day of Se	ptember A.D. 2015.
THE CONDITION OF THIS OBLIGATION IS SUC days to the Principal for New Wastewater Lift Station - Community Colle	
according to the terms of the proposal or bid made by t	
and enter into a contract with the Obligee in accordance shall give bond for the faithful performance thereof wir Principal shall, in case of failure so to do, pay to the reason of such failure, not exceeding the penalty of otherwise it shall be and remain in full force and effect.	e with the terms of said proposal or bid and award and th Surety or Sureties approved by the Obligee; or if the Obligee the damages which the Obligee may suffer by
In Testimony Whereof, the Principal and Surety have ca	used these presents to be duly signed and sealed.  East Coast, Lands caping and Construction Inc.
WITNESS:	(SEAL)
(If individual or Firm)	(SEAL)
ATTEST: (If Corporation)	Principal (SEAL)
(ii porporation)	SELECTIVE INSURANCE COMPANY OF AMERICA
	By: Attorney-in-Fact
	Paul J. Damiano

### ACKNOWLEDGMENT OF PRINCIPAL

(Individual or Partnership)

STATE OF	-,				
COUNTY OF	ss:				
On thisappeared the above named	day of	day of		,before me personally	
to me known and known to me to be the execution of the same.	the same described	in and who executed the a	bove instrument	and dully acknowledged	
		Notary P	ublic	County	
STATE OF RHODE ISLAND	(Co	orporation)			
COUNTY OF NEWPORT	_} ss:				
On this 30TH appeared WILLIAM F	day of	DEPTETIBLER	, _2015	,before me personally	
to me known, who, being by me duly	sworn, did depose	and say that he/she resides	in Pour	STICUTH, RIC	
that he/she is the SECRETARY the corporation described in and while the seal affixed to said instrument is corporation and that he/she signed his	n executed the foregoes such corporate se	going instrument; that he/sheal; that it was affixed by	order of the sea	of said corporation; that pard of Directors of said	
Λ	ACKNOWLE	DGMENT OF SURET	Y		
COUNTY OF PAVILLE COUNTY OF PAVILLE ON this appeared duly sworn, did depose and say that h	Paul J. Damia		,2015 to me k	,before me personally mown, who, being by me	
that he/she is the <u>Attorney-in-Fact</u> Selective Insurance Company of Ame		<del></del> .		of the	
the corporation described in and which the seal affixed to said instrument is corporation and that he/she signed hwith  Attorney-in-Fact subscribed to the will and was subscribed thereto by like or	h executed the fore; such corporate sea is/her name thereto Paul J. Damia thin instrument is in	al; that it was so affixed by by like order; and depondent into the genuine handwriting of Directors in the presence of	y order of the B ent further says and of the said f dependent.	oard of Directors of said that he/she is acquainted if knows him/her to be the Paul J. Damiano	
		Notary F	Ouklim & Mot Notary Pub nmission Exp	County lic ires 11/16/16	



Selective Insurance Company of America 40 Wantage Avenue Branchville, New Jersey 07890 973-948-3000

BondNo.B 1164625

### POWER OF ATTORNEY

**Public Bid** 

SELECTIVE INSURANCE COMPANY OF AMERICA, a New Jersey corporation having its principal office at 40 Wantage Avenue, in Branchville, State of New Jersey ("SICA"), pursuant to Article VII, Section 1 of its By-Laws, which state in pertinent part:

> The Chairman of the Board, President, Chief Executive Officer, any Executive Vice President, any Senior Vice President or any Corporate Secretary may, from time to time, appoint attorneys in fact, and agents to act for and on behalf of the Corporation and they may give such appointee such authority, as his/her certificate of authority may prescribe, to sign with the Corporation's name and seal with the Corporation's seal, bonds, recognizances, contracts of indemnity and other writings obligatory in the nature of a bond, recognizance or conditional undertaking, and any of said Officers may, at any time, remove any such appointee and revoke the power and authority given him/her.

does hereby appoint Paul J. Damiano

, its true and lawful attorney(s)-in-fact, full authority to execute on SICA's behalf fidelity and surety bonds or undertakings and other documents of a similar character issued by SICA in the course of its business, and to bind SICA thereby as fully as if such instruments had been duly executed by SICA's regularly elected officers at its principal office, in amounts or penalties not exceeding the sum of: Five Hundred Thousand Dollars (\$500,000.00)

Signed this 28th day of September

SELECTIVE INSURANCE COMPANY OF AME

Brian C. Sarisky

Its Executive VP, Head of Specialty Insuran

STATE OF NEW JERSEY:

:ss. Branchville

COUNTY OF SUSSEX

2015 before me, the undersigned officer, personally appeared Brian C. Saris 28thay of September, acknowledged himself to be the Vice President of SICA, and that he, as such Vice President, being authorized as executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by hir Vice President and that the same was his free act and deed and the free act and deed of SICA.

> Charlene Kimble **Notary Public of New Jersey** My Commission Expires 6/2/2018

The power of attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of SICA at a meeting duly called and held on the 6th of February 1987, to wit:

Notary Public

"RESOLVED, the Board of Directors of Selective Insurance Company of America authorizes and approves the use of a facsimile corporate seal, facsimile signatures of corporate officers and notarial acknowledgements thereof on powers of attorney for the execution of bonds, recognizances, contracts of indemnity and other writing obligatory in the nature of a bond, recognizance or conditional undertaking."

CERTIFICATION

I do hereby certify as SICA's Corporate Secretary that the foregoing extract of SICA's By-Laws and Resolution force and effect and this Power of Attorney issued pursuant to and in accordance with the By-Laws is val

Signed this 28th day of September

Michael H. Lanza, SICA Corporate ecretary

Important Notice: If the bond number embedded within the Notary Seal does not match the number in the upper right-hand corner of this Power of Attorney, contact us at 973-948-3000.

uu 38753

LICENSE NUMBER

December 31, 2015 EXPIRATION DATE

# UNDERGROUND UTILITY CONTRACTOR LICENSE

Issued this date: 3/19/2015

# MAX ESSERY- EASTCOAST LANDSCAPING & CONSTRUCTION, INC.

Print Name



Licensee Signature

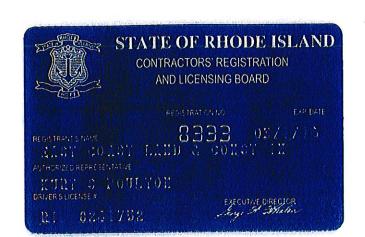
George W

Dat

Date

Executive Director R.I.C.R.L.B Signature

This is a temporary license. Licensee will be required to obtain a photo license card when notified by this Board.



## State of Rhode Island PAYER'S REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION

THE IRS REQUIRES THAT YOU FURNISH YOUR TAXPAYER IDENTIFICATION NUMBER TO US. FAILURE TO PROVIDE THIS INFORMATION CAN RESULT IN A \$50 PENALTY BY THE IRS. IF YOU ARE AN INDIVIDUAL, PLEASE PROVIDE US WITH YOUR SOCIAL SECURITY NUMBER (SSN) IN THE SPACE INDICATED BELOW. IF YOU ARE A COMPANY OR A CORPORATION, PLEASE PROVIDE US WITH YOUR EMPLOYER IDENTIFICATION NUMBER (EIN) WHERE INDICATED.

Taxpaver Identification Number (T.I.N.)
Enter your taxpayer identification number in the appropriate box. For most individuals, this is your social security number.  8ocial Security No. (SSN)  Employer ID No. (EIN)
NAME EAST COAST LANDSCAPENCY & CONSTRUCTION, INC. ADDRESS 202 CHASE ROAD
(REMITTANCE ADDRESS, IF DIFFERENT)  CITY, STATE AND ZIP GODE 1015T101TH, RI 02811
CERTIFICATION: Under penalties of perjury, I certify that:
<ol> <li>The number shown on this form is my correct Texpayer Identification Number (or I am waiting for a number to be issued to me), and</li> <li>I am not subject to backup withholding because either: (A) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (B) the IRS has notified me that I am no longer subject to backup withholding.</li> </ol>
Certification instructions You must cross out item (2) above if you have been notified by the IRS that you are subject to backup withholding because of under-reporting interest or dividends on your tax return. However, if after being notified by IRS that you were subject to backup withholding you received another notification from IRS that you are no longer subject to backup withholding, do not cross out item (2).
SIGNATURE TITLE SELETARY DATE 9 30 15 TEL NO. 401 683-1865
BUSINESS DESIGNATION:
Please Check One: Individual
NAME: Be sure to enter your full and correct name as listed in the IRS file for you or your business.
ADDRESS, CITY, STATE AND ZIP CODE: Enter your primary business address and remittance address if different from your primary address). If you operate a business at more than one location, adhere to the following:  1) Same T.I.N. with more than one location attach a list of location addresses with remittance address for each location and indicate to which location the year-end tax information return should be mailed.  2) Different T.I.N. for each different location submit a completed W-9 form for each T.I.N. and location. (One year-end tax information return will be reported for each T.I.N. and remittance address.)
CERTIFICATION Sign the certification, enter your title, date, and your telephone number (including area code and extension).

Mail to: Supplier Coordinator, One Capitol Hill, Providence, RI 02908

BUSINESS TYPE CHECK-OFF - Check the appropriate box for the type of business ownership.